

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name CVS/PHARMACY #10657	Telephone Number Est 812-948-8305 Own 401-770-5324	Date of Inspection 12/14/2021	ID#
Address 1950 STATE STREET, NEW ALBANY IN 47150			
Owner CVS/PHARMACY	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 12/24/2021
Owner's Address 1 CVS DRIVE MC 1160 WOONSOCKET, RI 02895-		Menu Type 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Person in Charge PAUL MARKS			
Responsible Person's Email PAULMARKS0979@ATT.NET			
Certified Food Handler			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected

Summary of Violations C <input type="checkbox"/> NC <input type="checkbox"/> R <input type="checkbox"/>		
Received by (name and title printed):		Inspected by (name and title printed): Thomas Snider CFS
Received by (signature):		Inspected by (signature): <i>Thomas Snider</i>
cc:	cc:	cc: